

JAN 20 2006

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**FROM:** Mike Garrabrants**DATE:** January 20, 2006

Number of pages with cover page:	19	
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Preparer of this slip has confirmed that facsimile number given is correct: 10766/msg4**Comments:**

Attorney Docket No.: 324212008100  
 Group Art Unit: 2141  
 Examiner: P. Kang  
 Serial No.: 09/654,405  
 Filing Date: September 1, 2000  
 Inventors: Janice YOO et al.  
 Title: TRAFFIC STATISTICS MONITORING SYSTEM WITH  
 TRACKING BY CATEGORIES AND TERMS

**Documents attached:**

- Transmittal Form (1 page)
- Fee Transmittal (original + copy for fee processing (2 pages)
- Amendment (14 pages)
- Petition for Extension of Time (1 page)

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<b>TRANSMITTAL FORM</b>  <i>(to be used for all correspondence after initial filing)</i>	
Application Number	09/654,405
Filing Date	September 1, 2000
First Named Inventor	Janice YOO
Art Unit	2141
Examiner Name	P. Kang
Attorney Docket Number	324212008100
Total Number of Pages in This Submission	18

**ENCLOSURES (Check all that apply)**

<input checked="" type="checkbox"/> Fee Transmittal Form (original + copy for fee processing (2 pages))  <input type="checkbox"/> Fee Attached  <input checked="" type="checkbox"/> Amendment/Reply (14 pages)  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input checked="" type="checkbox"/> Extension of Time Request (1 page)  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Reply to Missing Parts/Incomplete Application  <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD. Number of CD(s) _____  <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Facsimile Coversheet
Remarks		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name	MORRISON & FOERSTER LLP	(Customer No.: 20872)
Signature		
Printed name	Michael S. Garabrant	
Date	January 20, 2006	Reg. No. 51,230

I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, facsimile no. (571) 273-8300, on the date shown below.

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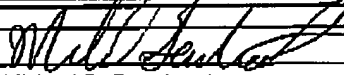
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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4918). <b>FEE TRANSMITTAL</b> <b>For FY 2005</b>		<b>Complete if Known</b> Application Number 09/654,405 Filing Date September 1, 2000 First Named Inventor Janice YOO Examiner Name P. Kang Art Unit 2141 Attorney Docket No. 324212008100	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			
<b>TOTAL AMOUNT OF PAYMENT</b> (\$) 700.00			

<b>METHOD OF PAYMENT (check all that apply)</b> <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____ <input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 03-1952 Deposit Account Name: Morrison & Foerster LLP For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments	
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FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	0.00
Design	200	100	100	50	130	65	0.00
Plant	200	100	300	150	160	80	0.00
Reissue	300	150	500	250	600	300	0.00
Provisional	200	100	0	0	0	0	0.00
2. EXCESS CLAIM FEES							
Fee Description	Fee (\$)	Small Entity Fee (\$)					
Each claim over 20 (including Reissues)	50	25					
Each independent claim over 3 (including Reissues)	200	100					
Multiple dependent claims	360	180					
<b>Total Claims</b> 47 - 42 = <b>Extra Claims</b> 5 x <b>Fee (\$)</b> 50.00 = <b>Fee Paid (\$)</b> 250.00		<b>Multiple Dependent Claims</b> <b>Fee (\$)</b> 360.00 <b>Fee Paid (\$)</b> 0.00					
<b>Indep. Claims</b> 4 - 5 = <b>Extra Claims</b> 0 x <b>Fee (\$)</b> 200.00 = <b>Fee Paid (\$)</b> 0.00							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
<b>Total Sheets</b> - 100 = <b>Extra Sheets</b> /50 <b>Number of each additional 50 or fraction thereof</b> (round up to a whole number) x <b>Fee (\$)</b> 250.00 = <b>Fee Paid (\$)</b> 0.00							
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)							0.00
Other (e.g., late filing surcharge), 1252 Extension for response within second month							450.00

<b>SUBMITTED BY</b> Signature 		Registration No. (Attorney/Agent) 51,230	Telephone (650) 813-4227
Name (Print/Type) Michael S. Garrabrants		Date January 20, 2006	